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MEDICAID MEMO

TO: All Pharmacies, Medical Providers, Dental Providers, and
Managed Care Organizations Participating in the Virginia
Medical Assistance Programs

FROM: Patrick W. Finnerty, Director
Department of Medical Assistance Services (DMAS)

MEMO: Special
DATE: September 3, 2008

SUBJECT: Phase II of Tamper-Resistant Prescription Pad (TRPP) Requirements –
Effective October 1, 2008

The purpose of this memorandum is to inform you that Phase II of the federal tamper-resistant prescription pads (TRPP) mandate becomes **effective October 1, 2008**. As of this date the use of TRPPs for most outpatient written prescriptions for fee-for-service FAMIS and Medicaid enrollees shall be required in order to receive Medicaid reimbursement.

Tamper-Resistant Prescription Pads

In 2007, Congress enacted Section 7002 (b) of the U.S. Troop Readiness, Veterans' Health Care, Katrina Recovery and Iraq Accountability Appropriations Act (P.L. 110-28), which mandated that federal reimbursement be denied to states for Medicaid patients' outpatient prescriptions that are not written on tamper-resistant prescription pads or paper. Phase I of this federal mandate became effective April 1, 2008. As of that date Medicaid participation required the use of tamper-resistant pads or paper on all non-electronic, outpatient prescriptions the Virginia Medicaid and FAMIS Fee-For-Service Program (excluding e-prescribing, fax, or telephone).

During Phase I Virginia Medicaid required that all prescription pads or paper used for Medicaid and FAMIS fee-for-service recipients contained **at least one** of the following characteristics:

- 1) One or more industry recognized features designed to prevent unauthorized copying of a completed or blank prescription.
- 2) One or more industry recognized features designed to prevent the erasure or modification of information written on the prescription by the prescriber.
- 3) One or more industry recognized features designed to prevent the use of counterfeit prescriptions.

Effective October 1, 2008, all hand written or computer generated and printed prescriptions must contain at least one feature from each of the three categories described in the Attachment appended to this Memorandum (the same feature cannot be used multiple times). Prescriptions for Medicaid patients that are submitted via telephone, fax, or e-prescribe will continue to be exempt from these tamper-resistant requirements.

What Qualifies As A Tamper-Resistant Prescription Pad?

While TRPP is a federal requirement for Medicaid providers, there is no single national standard that defines tamper-resistant. Each state Medicaid agency must determine which tamper-resistant features they shall require. Virginia has reviewed both the recommendations of the industry and other state Medicaid agencies and decided upon the standards described in this Memorandum. Effective October 1, 2008, Virginia Medicaid shall require that all prescription pads or paper used for Medicaid and FAMIS fee-for-service recipient prescriptions contain **at least one feature from each of the three tamper-resistant categories described in the Attachment appended to this Memorandum.**

The federal Medicaid authority, the Centers for Medicare & Medicaid Services (CMS), has stated that with regard to printed prescriptions generated from electronic medical records (EMRs) or e-prescribing applications, while special paper may be used to achieve copy resistance—it is not necessary. Prescriptions generated from EMRs or e-prescribing may be printed on plain paper, and still be fully compliant with the TRPP mandate, provided they contain at least one feature from each of the three tamper-proof categories.

Providers who write prescriptions for Medicaid and FAMIS recipients should contact their vendor to secure an appropriate supply of prescription pads or paper that will meet the requirements and begin to use these pads or paper prior to October 1, 2008. Orders may take up to four (4) weeks to process.

Appended to this Memorandum is an Attachment that summarizes the features that may be used for tamper-resistant pads or paper in order to comply with the CMS requirements for Phase II. They are categorized according to the three types of tamper-proof features as described by CMS.

Affected Medicaid/FAMIS Clients

The use of tamper-resistant prescription pads is required for the Medicaid, MEDALLION, FAMIS, and FAMIS Plus fee-for-service populations. CMS has offered guidance to the effect that the tamper-resistant pad requirement applies to all outpatient drugs, including over-the-counter drugs, whether Medicaid is the primary or secondary payor for the prescription. This includes prescriptions for “dual eligibles” where a Medicare Part D plan is the primary payer and Virginia Medicaid is the secondary payer. While the law specifies the term “prescription pad,” CMS has stated that these requirements also apply to computer-generated prescriptions that are printed using paper inserted into the printer.

Exemptions to Requirement

According to CMS, the following are exemptions to the tamper-resistant prescription pad requirements:

- Prescriptions paid by a Medicaid/FAMIS managed care entity (*this means that prescriptions written for patients enrolled in any of Virginia's contracted managed care organizations -- Anthem, Virginia Premier, AmeriGroup, CareNet, and Optima -- are not subject to this requirement*);
- Prescriptions transmitted to the pharmacy via e-prescribing, fax, or telephone. **Faxing is the preferred method.** *Please note, however, that Drug Enforcement Administration regulations require Schedule II controlled substances to be written prescriptions; in addition, Guidance Document 110-35 from the Virginia Board of Pharmacy, provides further guidance on faxed and electronically transmitted prescriptions; this document can be found at the following web address:*

<http://www.dhp.virginia.gov/Pharmacy/guidelines/110-35> Requirements for prescriptions.doc

- Drugs provided in nursing facilities, intermediate care facilities for the mentally retarded, and other specified institutional and clinical settings, as long as the patient never has the opportunity to handle the written prescription; and
- Refills of written prescriptions presented at a pharmacy before October 1, 2008 (when Phase II of the mandate took effect).

Key Implementation Issues

DMAS will take the following actions to facilitate the transition to tamper-resistant prescription pads:

- DMAS will provide payment for out-of-state prescriptions filled by Virginia pharmacists so long as the written prescription is on a tamper-resistant pad or paper that meets at least one of the required features from each of the 3 categories described in the Attachment appended to this Memorandum.
- DMAS will authorize payment for prescriptions that are filled when presented on a non-compliant prescription drug pad so long as the pharmacy receives a verbal, faxed, electronic or compliant written prescription within 72 hours after the date on which the prescription was filled. **Faxing is the preferred method.**

Additional Information

A web page on the DMAS web site offers additional information on the TRPP mandate: <http://www.dmas.virginia.gov/pharm-news.htm>. The web page contains a link to CMS' Frequently Asked Questions (FAQs) concerning TRPPs.

Providers and recipients can also contact the First Health Services Clinical Call Center at 1-800-932-6648 (available 24 hours a day, seven days a week) with questions specifically regarding submission of appropriate prescriptions.

ELIGIBILITY AND CLAIMS STATUS INFORMATION

DMAS offers a web-based Internet option (ARS) to access information regarding Medicaid or FAMIS eligibility, claims status, check status, service limits, prior authorization, and pharmacy prescriber information. Go to <http://virginia.fhsc.com> to enroll for access to the system. The MediCall voice response system provides the same information and can be accessed by calling 1-800-884-9730 or 1-800-772-9996. Both options are available at no cost to Medicaid providers.

“HELPLINE”

The “HELPLINE” is available to answer questions Monday through Friday from 8:30 a.m. to 4:30 p.m., except on state holidays. The “HELPLINE” numbers are:

- 1-804-786-6273 (Richmond area and out-of-state long distance)
- 1-800-552-8627 (All other areas (in-state, toll-free long distance))

Please remember that the “HELPLINE” is for provider use only. Please have your National Provider Identifier (NPI) Number available when you call.

COPIES OF MANUALS

DMAS publishes electronic and printable copies of its Provider Manuals and Medicaid Memoranda on the DMAS website at www.dmas.virginia.gov. Refer to the Provider Column to find Medicaid and SLH (State and Local Hospitalization Program) Provider Manuals or click on “Medicaid Memos to Providers” to view Medicaid Memoranda. The Internet is the most efficient means to receive and review current provider information. If you do not have access to the Internet or would like a paper copy of a manual, you can order it by contacting Commonwealth-Martin at 1-804-780-0076. A fee will be charged for the printing and mailing of the manuals and manual updates requested.

PROVIDER E-NEWSLETTER SIGN-UP

DMAS is pleased to inform providers about the creation of the new Provider E-Newsletter. The intent of this electronic newsletter is to inform, communicate, and share important program information with providers. Covered topics include changes in claims processing, common problems with billing, new programs or changes in existing programs, and other information that may directly affect providers. If you would like to receive the electronic newsletter, please sign up at www.dmas.virginia.gov/pr-enewsletter.asp.

Please note that the Provider E-newsletter is not intended to take the place of Medicaid Memos, Medicaid Provider Manuals, or any other official correspondence from DMAS.

Attachment

Category 1 – Copy Resistance: One or more industry recognized features designed to prevent unauthorized copying of a completed or blank prescription form.	
Feature	Description
“Void,” “Illegal,” or “Copy” pantograph <u>with or without</u> Reverse “Rx”	<p>The word “Void,” “Illegal,” or “Copy” appears when the prescription is photocopied. Except where state law mandates the word “Void” or “Illegal” – it is recommended that the pantograph show the word “Copy” if the prescription is copied. The pantograph should be configured so as not to obscure the security feature description contained on the prescription, the patient and prescriber demographics, or the medication and directions.</p> <p>Some pantographs can be problematic because when the prescription is copied, the resulting “void” or other wording that appears makes the underlying prescription difficult to read. This type of pantograph should be avoided. We suggest that you ask your pad vendor about hollow “VOID” pantograph lettering which is less likely to obscure the prescription information.</p> <p>The Reverse Rx disappears when copied at a light setting – thus making the pantograph more effective in copy resistance. The pantograph may be used with a reverse Rx, but Reverse Rx is not effective as a feature by itself.</p>
Micro printing – To be effective, this feature must be printed in 0.5 font or less making it illegible to the pharmacist when copied	Very small font which is legible (readable) when viewed at 5x magnification or greater, and illegible when copied.
Thermochromic ink	Ink changes color with temperature change.
Coin-reactive ink	Ink changes color when rubbed by a coin.

Watermarking Security back print (artificial watermark)	Printed on the back of prescription form. The most popular wording for the security back print is “Security Prescription” or the security back print can include the states name. Can only be seen when viewed at an angle.
Digital watermarks	Weak digital watermarks cannot be read if copied and strong digital watermarks provide digital rights management/“proof” of origin when copied.
Watermarking on special paper	Special paper contains a watermark that can be seen when backlit.

Category 2 – Erasure / Modification Resistance: One or more industry-recognized features designed to prevent the erasure or modification of information written / printed on the prescription by the prescriber.	
Features to Prevent Erasure	Description
An erasure revealing background (erasure resistance)	Background that consists of a solid color or consistent pattern that has been printed onto the paper. This will inhibit a forger from physically erasing written or printed information on a prescription form. If someone tries to erase, the consistent background color will look altered and show the color of the underlying paper.
Toner Receptor Coating / Toner Lock or Color Lock paper (erasure resistance for computer generated prescriptions <u>printed with a laser printer</u>) OR Chemically reactive paper (erasure resistance for hand written prescriptions)	Special printer paper that establishes a strong bond between laser-printed text and paper, making erasure obvious. Note – this is NOT necessary for inkjet printers – as the ink from inkjet printers is absorbed into normal “bond” paper. If exposed to chemical solvents, oxidants, acids, or alkalis that can be used to alter the prescription, the chemically reactive paper will react and leave a mark visible to the pharmacist.
Category 2:	Erasure / Modification Resistance

Features to Prevent Modification	Description
Quantity check off boxes and refill indicator (circle or check number of refills or “NR)	<p>In addition to the written quantity on the prescription, quantities are indicated in ranges. It is recommended that ranges be 25’s with the highest being “151 and over”. The range box corresponding to the quantity prescribed MUST be checked for the prescription to be valid.</p> <p>The refill indicator indicates the number of refills on the prescription. Refill numbers must be used to be a valid prescription.</p>
<p>Pre-printed language on prescription paper</p> <p>Example: “Rx is void if more than XXX Rx’s on paper”</p>	<p>Reduces ability to add medications to the prescription. Line must be completed for this feature to be valid. Computer printer paper can accommodate this feature by printing, “This space intentionally left blank” in an empty space or quadrant.</p>
Quantity and Refill Border and Fill (this is the recommended for computer generated prescriptions)	<p>Quantities and refill # are surrounded by special characters such as an asterisks to prevent modification, e.g. QTY **50** Value may also be expressed as text, e.g. (FIFTY), (optional).</p>

**Please note that while ONLY one feature from this Category 2 is required, it is strongly recommended that one feature of erasure resistance and one feature of modification resistance be used. Inkjet printed prescriptions are de-facto erasure resistant based on the characteristics of inkjet ink.

Category 3 – Counterfeit Resistance: One or more industry-recognized feature designed to prevent the use of counterfeit prescription forms.

Feature	Description
Security features and descriptions listed on prescriptions – this feature is <u>strongly</u> recommended on all prescriptions	Complete list of the security features on the prescription paper for compliance purposes. This is strongly recommended to aid pharmacists in identification of features implemented on prescription.
Thermochromic ink	Ink changes color with temperature change.
State Approved Vendor ID	This feature is only effective in states with an approved vendor listing.
Serial number	Number issued by printer of prescription or uniquely assigned by EMR or e-prescribing software; may or may not be sequential. Only valid if reported and tied to the pharmacy claim adjudication process. NY is the only state that has this system currently in place.
Encoding techniques (bar codes)	Bar codes on prescription. Serial number or Batch number is encoded in a bar code.
Security Thread	Metal or plastic security threads embedded in paper as used in currency.